



INPATIENT MEDICATIONS (IM) NURSES' USER MANUAL

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Nurses' Manual

Table of Contents

Introduction.....	1
List Manager.....	3
Hidden Actions.....	5
Order Processing.....	9
Order Entry (UD)	9
Non-Verified/Pending Orders	9
IOE Inpatient Order Entry/Order Entry (UD)	10
New Order Entry.....	16
Other Order Actions - Edit, Hold, Discontinue, Renew.....	20
Order Sets.....	23
Discontinue All of a Patient's Orders	24
Hold All of a Patient's Orders.....	25
What You Can Edit	27
EUP Edit Inpatient User Parameters	27
Patient's Default Stop Date	28
All About MARs.....	29
24 24 Hour MAR.....	29
7 7 Day MAR.....	31
14 14 Day MAR.....	34
AP1 Action Profile #1	37
AP2 Action Profile #2	38
Medications Due Worksheet	39
Reports, Reports, and More Reports.....	41
AAuthorized Absence/Discharge Summary	41
Extra Units Dispensed Report.....	42
INpatient Stop Order Notices	42
Patient Profile (Extended).....	42
INquiries Menu.....	43
Dispense Drug Look-Up.....	43
Standard Schedules	43
IPF Inpatient Profile	45
Misc.....	47
Align Labels (Unit Dose).....	47
Discontinue All of a Patient's Orders	47
Label Print/Reprint	47

PATient Profile (Unit Dose)	47
Glossary	49
Index.....	60

Since the documentation is arranged in a topic oriented format and the screen options are not, a menu tree is provided below for the newer users who may need help finding the explanations to the options.

Menu Tree

Topic oriented section

	Align Labels (Unit Dose)	Misc
	Discontinue All of a Patient's Orders	Misc
EUP	Edit Inpatient User Parameters	What you can Edit
	Hold All of a Patient's Orders	Using List Manager
IOE	Inpatient Order Entry	Using List Manager
IPF	Inpatient Profile	Inquiries
INQuiries Menu ...		
	Dispense Drug Look-Up	Inquiries
	Standard Schedules	Inquiries
	Label Print/Reprint	Misc
	Non-Verified/Pending Orders	Using List Manager
	Order Entry	Using List Manager
	PATient Profile (Unit Dose)	Misc
	Reports Menu ...	All about MARS
	24 24 Hour MAR	All about MARS
	7 7 Day MAR	All about MARS
	14 14 Day MAR	All about MARS
	AP1 Action Profile #1	All about MARS
	AP2 Action Profile #2	All about MARS
	AUthorized Absence/Discharge Reports	
	Summary	
	Extra Units Dispensed Report	Reports
	INpatient Stop Order Notices	Reports
	Medications Due Worksheet	Reports
	Patient Profile (Extended)	Reports

Introduction

The Inpatient Medications package is part of the Computerized Patient Record System (CPRS). It provides a method of management, dispensing, and administration of inpatient drugs within the hospital. Inpatient Medications combines clinical and patient information that allows each medical center to enter orders for patient, dispense medications by means of Pick Lists, print labels, create Medication Administration Records (MARs), and create Management Reports.

List Manager

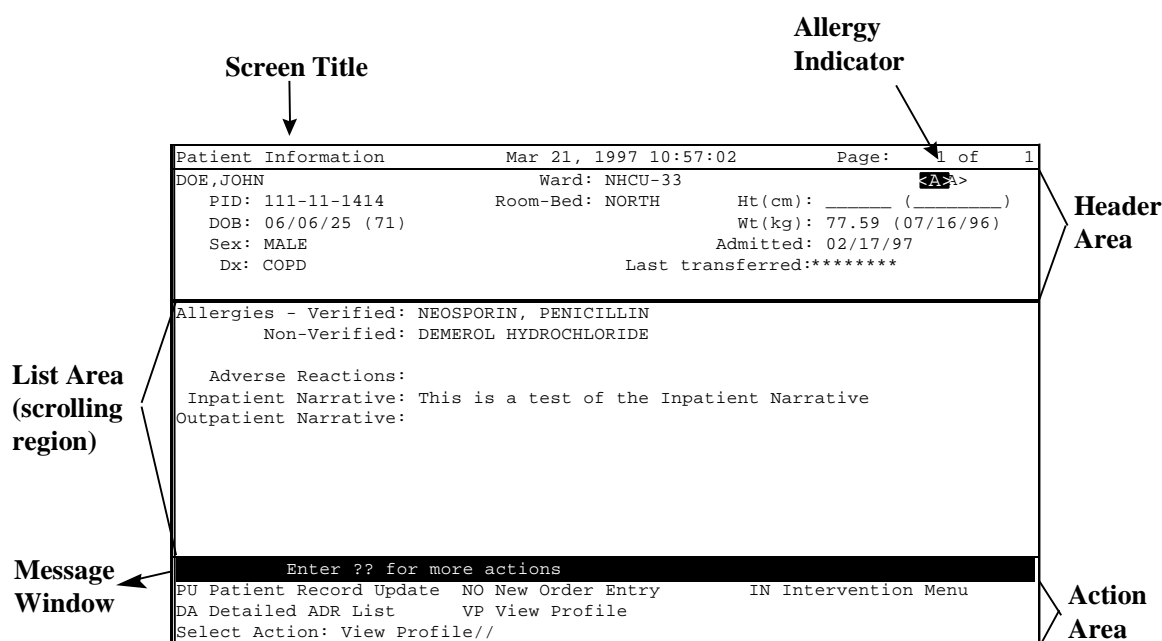
You have probably noticed that when you process an order, the screen has dramatically changed from the previous version. The new screen was designed using List Manager.

This new screen will give you

- more pertinent information
- easier accessibility to vital reports and areas of a patient's chart you may wish to see.

Please take the time to read over the explanation of the screen and the actions that you can now execute at the touch of a button. This type of preparation before using List Manager is effective in saving time and effort.

Inpatient List Manager



Screen Title: The screen title changes according to what type of information List Manager is displaying (e.g., Patient Information, Non-Verified Order, Inpatient Order Entry, etc).

Allergy Indicator: This indicator will display when allergy information has been entered for the patient.

Header Area: The header area is a “fixed” (non-scrollable) area that displays demographic information for a patient.

List Area: (scrolling region): This is the section that will scroll (like the previous version) and display the information that an action can be taken on.

Message Window: This section displays a plus (+) sign, minus (-) sign, if the list is longer than one screen, and informational text (i.e., Enter ?? for more actions). If you enter the plus sign at the action prompt, List Manager will “jump” forward to the next screen. If there is a minus sign displayed and you enter one at the action prompt, List Manager will “jump” back to the previous screen. The plus and minus signs are only valid actions if they are displayed in the message window.

Action Area: The list of valid actions display in this area of the screen. If you enter a double question mark (??) at the “Select Action” prompt, you will receive a “hidden” list of additional actions that are available to you.

Using List Manager

List Manager is a tool designed so that a list of items can be presented to the user for an action.

For Inpatient Medications, the List Manager does the following:

- gives capability to browse through a list of orders
- gives capability to take action(s) against those items
- gives capability to print MARs, labels, and profiles from within the *Inpatient Order Entry* option.
- gives the user the capability to select a different option than the option they are in.

Hidden Actions

You may enter a double question mark (??) at the “Select Action” prompt for a list of all actions available. Actions are entered by typing the name(s), or synonym(s) at the “Select Action” prompt.

The following is a list of generic List Manager actions with a brief description. The synonym for each action is shown in brackets following the action name. Entering the synonym is the quickest way to select an action.

<u>Action</u>	<u>Description</u>
Next Screen [+]	move to the next screen
Previous Screen [-]	move to the previous screen
Up a Line [UP]	move up one line
Down a line [DN]	move down one line
First Screen [FS]	move to the first screen
Last Screen [LS]	move to the last screen
Go to Page [GO]	move to any selected page in the list
Re Display Screen [RD]	redisplay the current screen
Print Screen [PS]	prints the header and the portion of the list currently displayed
Print List [PL]	prints the list of entries currently displayed
Search List [SL]	finds selected text in list of entries
Quit [Q]	exits the screen
Auto Display (On/Off) [ADPL]	toggles the menu of actions to be displayed/not displayed automatically
Shift View to Right [>]	Shifts the view on the screen to the right
Shift View to Left [<]	Shifts the view on the screen to the left

The following is a list of Inpatient Medications specific hidden actions with a brief description. The synonym for each action is shown in brackets following the action name. Entering the synonym is the quickest way to select an action.

MAR Menu [MAR]	takes you to the MAR Menu
24 Hour MAR [24]	will show the 24 Hour MAR
7 Day MAR [7]	will show the 7 Day MAR
14 Day MAR [14]	will show the 14 Day MAR
Medications Due Worksheet [MD]	will show the Worksheet
Label Print/Reprint [LBL]	Takes you to the Label Print/Reprint Menu
Align Labels (Unit Dose) [ALUD]	Allows you to align the MAR label stock on a printer
Label Print/Reprint [LPUD]	Allows you to print or reprint an MAR label
Align Labels (IV) [ALIV]	Allows you to align the IV bag label stock on a printer
Individual Labels (IV) [ILIV]	Allows you to print or reprint an IV bag label
Scheduled Labels (IV) [SLIV]	Allows you to print the scheduled IV bag label
Reprint Scheduled Labels (IV) [RSIV]	Allows you to reprint scheduled IV bag labels
Other Pharmacy Options [OTH]	Takes you to more pharmacy options
Pick List Menu [PIC]	Takes you to the Pick List Menu
Enter Units Dispensed [EN]	Allows you to enter the units actually Dispensed for a Unit Dose order
Extra Units Dispensed [EX]	Allows you to enter extra units dispensed for a Unit Dose order
Pick List [PL]	
Report Returns [RRS]	Allows you to enter units returned for a Unit Dose order
Reprint Pick List [RPL]	Allows you to reprint a pick list
Send Pick list to ATC [SND]	Allows you to send a pick list to the ATC
Update Pick List [UP]	Allows you to update a pick list
Returns/Destroyed Menu [RET]	Takes you to the Returns/Destroyed options
Report Returns (UD) [RR]	Allows you to enter units returned for a Unit Dose order
Returns/Destroyed Entry (IV) [RD]	Allows you to enter units returned or destroyed for an order

Patient Profiles [PRO]	Takes you to the Patient Profile menu
Inpatient Medications Profile [IP]	Allows you to generate an Inpatient Profile for a patient
IV Medications Profile [IV]	Allows you to generate an IV Profile for a patient
Unit Dose Medications Profile [UD]	Allows you to generate a Unit Dose profile for a patient
Outpatient Prescriptions [OP]	Allows you to generate an Outpatient profile for a patient
Action Profile #1 [AP1]	Allows you to generate an Action Profile #1
Action Profile #2 [AP2]	Allows you to generate an Action Profile #2
Patient Profile (Extended) [EX]	Allows you to generate an Extended Patient Profile

The following actions are available when selecting an order for processing.

Speed Discontinue [DC]	will be able to speed discontinue
Speed Renew [RN]	will be able to speed renew
Speed Finish [SF]	will be able to speed finish
Speed Verify [SV]	will be able to speed verify

The following action is available when selecting an order that is a Non-Verified Pending order.

Jump to a Patient [JP]	will take you to another patient
------------------------	----------------------------------

Order Processing

Within the Inpatient Medications package there are three different paths that you can take to enter a new order or take action on an existing order. They are (1) Order Entry (UD), (2) Non-Verified/Pending Orders, (3) Inpatient Order Entry/Order Entry (UD). Each of these paths differs by the prompts that you will be asked. Once you have reached the point of entering a new order or selecting an existing order, the process becomes the same for each path. Below is a summary of the different paths.

Order Entry (UD) [PSJU NE]

Inpatient Order Entry allows the nurse to create, edit, renew, hold, and discontinue **Unit Dose** while remaining in the Unit Dose module.

When you access the *Inpatient Order Entry* option from the Unit Dose module for the first time within a session, you are first asked to select the IV room in which you wish to enter orders. You are then given the label and report devices defined for the IV room you choose. If no devices have been defined, you will be given the opportunity to choose them. If you exit this option and re-enter within the same session, you are shown your current label and report devices.

Non-Verified/Pending Orders [PSJU VBW]

This option allows easy identification and processing of non-verified and/or pending orders. This option will also show pending and pending renewal orders, which are orders from CPRS (Computerized Patient Record System) that have not been finished by Pharmacy Service.

You can choose to look at non-verified and/or pending orders for a ward group (**G**), ward (**W**), or single patient (**P**). If ward or ward groups is selected, patients will be listed by wards and then by teams.

If **no** profile is chosen, the orders for the patient selected will be displayed for verification or completion by login date with the earliest date showing first. If a profile is chosen, the orders will be selected from this list for processing (any order may be selected).

IOE Inpatient Order Entry/Order Entry (UD) [PSJ OE]

Inpatient Order Entry allows the nurse to create, edit, renew, hold, and discontinue **Unit Dose** and **IV orders**, as well as put existing IV orders on call for any patient, while remaining in the Unit Dose module.

When you access the *Inpatient Order Entry* option from the Unit Dose module for the first time within a session, you are first asked to select the IV room in which you wish to enter orders. You are then given the label and report devices defined for the IV room you choose. If no devices have been defined, you will be given the opportunity to choose them. If you exit this option and re-enter within the same session, you are shown your current label and report devices.

Order Entry (UD) functions almost identically to Inpatient Order Entry but does not include IV orders on the profile and only Unit Dose order may be entered or processed.

Name of the Patient

The Patient Information List is then displayed for the selected patient. This list contains the patient's demographic data, allergy/adverse reaction data, and Pharmacy Narratives.

- Patient Demographics**

The patient's demographic information is displayed in the heading of the List Manager display, and includes information about the patient's current admission.

Patient Information	Jun 28, 1997 09:15:58	Page:	1 of	1
FIFE, BARNEY	Ward: 1 EAST			
PID: 123-14-1960	Room-Bed: 244-B	Ht (cm):	_____ (_____)	
DOB: 12/14/60 (35)		Wt (kg):	_____ (_____)	
Sex: MALE		Admitted:	01/18/97	
Dx: GUN SHOT WOUND		Last transferred:		

- Allergy/ADR Information**

This includes non-verified and verified Allergy/ADR information as defined in the Allergy package. The allergy data is sorted by type (DRUG, OTHER, FOOD). If no data is found for a category, the heading for that category is not displayed.

- **Pharmacy Narratives**

A new INPATIENT NARRATIVE field (#5) has been added in Version 5.0. This field is similar to the OUTPATIENT NARRATIVE (#5), and may be used by inpatient pharmacy staff to display information specific to the current admission for the patient. Data in this field is automatically deleted when the patient is admitted.

Allergies: - Verified: Non - Verified: Adverse Reactions: Inpatient Narrative: Outpatient Narrative:
--

- **Other Actions that can be taken.**

Enter ?? for more actions	
PU Patient Record Update	NO New Order Entry
DA Detailed Allergy/ADR List	IN Intervention Menu
VP View Profile	
Select Action: View Profile//	

Below are the primary actions available from the Patient Information list:

- **DA Detailed Allergy/ADR List**

Displays a detailed listing of the selected item from the patient's Allergy/ADR List. Entry to the *Edit Allergy/ADR Data* option is provided with this list also.

- **EA Enter/Edit Allergy/ADR Data**

Provides access to the Adverse Reaction Tracking (ART) package to allow entry and/or edit of allergy adverse reaction data for the patient. See the Allergy package documentation for more information on Allergy/ADR processing.

- **SA Select Allergy**

Allows the user to select a specific allergy to view.

- **PU Patient Record Update**

Allows editing of the Inpatient Narrative and the Patient's Default Stop Date for Unit Dose Order entry.

- **NO New Order Entry**

Allows new Unit Dose and IV orders to be entered for the patient.

- **VP View Profile**

Allows selection of a Long, Short, or NO profile for the patient. The profile displayed in the *Inpatient Order Entry* and *Non-Verified/Pending Orders* options will include IV and Unit Dose orders.

- **IN Intervention Menu**

- Allows entry of new interventions or edit, delete, view, or printing of an existing intervention.
- **New:** This option is used to enter an entry into the APSP INTERVENTION file (#9009032.4).
- **Edit:** This option is used to edit an already existing entry in the Intervention file (#9009032.4).
- **Delete:** This option is used to delete an intervention from the APSP INTERVENTION file (#9009032.4). You may only delete an intervention that was entered on the same day.
- **View:** This option is used to display Pharmacy Interventions in a captioned format.
- **Print:** This option is used to obtain a captioned printout of Pharmacy Interventions for a certain date range. It will print out on normal width paper and can be queued to print at a later time.

Patient Profile

- Patient Demographics**

The patient's demographic information is displayed in the heading of the List Manager display, and includes information about the patient's current admission.

NIVEK, EPSILON	Ward: 2B	<A>
PID: 523-23-4723	Room-Bed:	Ht (cm): _____ (_____)
DOB: 10/23/27 (70)		Wt (kg): _____ (_____)
Sex: _____		Admitted: 12/08/97
Dx: THIS IS THE ONE.	Last transferred: *****	

- Patient Profile List:** contains all orders for a selected profile type.

- - - - - A C T I V E - - - - -									
1	->	ASPIRIN SUPP,RTL	C	12/15	01/14	A			
		Give: 15MG PO MO-WE-FR							
2	->	ASPIRIN SUPP,RTL	C	01/09	02/08	A			
		Give: 325MG PO QD							
3		PREDNISOLONE SOLN,OPH	C	01/09	02/08	A			
		Give: 325MG PO QD							
4	->	METHYLPREDNISOLONE INJ,SUSP	O	12/19	12/19	E			
		Give: 60MG IV ONCE							
5	->	LORAZEPAM INJ	P	01/05	01/15	A			
		Give: 10CC IM Q12H							
- - - - - N O N - V E R I F I E D - - - - -									

The orders on the profile are sorted first by the status of ACTIVE, NON-VERIFIED, PENDING, PENDING RENEWALS, and then alphabetically by SCHEDULE TYPE. Pending orders with a priority of STAT are listed first and are displayed in a bold and blinking text for easy identification. After SCHEDULE TYPE, orders are sorted alphabetically by DRUG (the drug name listed on the profile), and then in descending order by START DATE.

If a Unit Dose order not yet verified by pharmacy has been verified by nursing, it will be listed under the ACTIVE heading with a -> next to its number identifying it as non-verified. Orders may be selected by choosing the Select Order action, or directly from the profile using the order number displayed to the left of the drug. Multiple orders may be chosen by entering the numbers of each order to be included separated by commas (e.g., 1,2,3), or a range of numbers using the dash (e.g., 1-3).



Note: The START DATE and DRUG sort may be reversed using the INPATIENT PROFILE ORDER SORT field in the INPATIENT USER PARAMETERS file (#53.45).

- **actions that can be taken**

+ Enter ?? for more actions			
PI	Patient Information	SO	Select Order
PU	Patient Record Update	NO	New Order Entry
Select Action: Next Screen//			

Below are the primary actions available in the Patient Profile list:

- **PI Patient Information**

The Patient Information List is then display for the selected patient. This list contains the patient's demographic data, Allergy/Adverse Reaction data, and Pharmacy Narrative.

- **PU Patient Update**

Allows editing of the Inpatient Narrative and the patient's Default Stop Date for Unit Dose Order entry.

- **SO Select Order**

Allows selection of the orders to be processed. Multiple orders may be chosen by entering the numbers of each order to be included separated by commas (e.g., 1,2,3), or a range of numbers using the dash (e.g., 1-3).

- **NO New Order Entry**

Allows new unit Dose and IV orders to be entered for the patient.

Unit Dose Order View List

After the patient is selected and length of profile is chosen, order entry follows two basic steps:

1. Take action on a previously entered order by selecting it from the profile *or* create a new order by entering the drug, schedule, administration times, etc., pertaining to the type of order.
2. If Auto-Verify is disabled, the order must be verified before it is included on the Pick List, MAR, etc. For more information on the Auto-Verify function see the *Edit User Parameters* option of the Unit Dose Supervisor's Manual.

• Patient Demographics/Allergy/ADR Data

ABC, PATIENT	Ward: 1 EAST	
PID: 123-14-1960	Room-Bed: 244-C	Ht (cm): _____ (_____)
DOB: 12/14/60 (35)		Wt (kg): _____ (_____)

This includes a condensed listing of the patient's demographic and location information. If the patient has Allergy/ADR data defined, an "<A>" is displayed to the right of the ward location to alert the user of the existence of this information (**Note:** This data may be displayed using the Detailed Allergy/ADR List action). The status and type of order are displayed in the top left corner of the heading, and will include the priority (if defined) for pending orders.

• Order View

*(1)Orderable Item: THIOTHIXENE CAP		
Instructions:		
*(2)Dosage Ordered: 325MG	*(3)	Start: 07/22/94 09:00
*(4) Med Route: ORAL	*(5)	Stop: 08/19/94 2:40
*(6) Schedule Type: CONTINUOUS	(7)	Self Med: NO
*(8) Schedule: QID		
(9) Admin Times: 08-12-16-20		
*(10) Provider: ZHIVAGO, DOCTOR		
(11) Special Instructions: TESTING		
(12) Dispense Drug	U/D	Inactive Date
THIOTHIXENE 20MG U/D	2	
Entry By: INPATIENT-MEDS, PROVIDER		
Entry Date: 07/22/94 08:09		

The Unit Dose Order View List displays detailed order information and allows actions to be taken on the selected Unit Dose order. Fields that may be edited will be identified by a number displayed to the left of the field name. This number is

used when selecting fields to be edited. Fields marked with an “*” next to its number will cause this order to be discontinued and a new one created if it is changed. If a pending order is selected, the system will determine any default values for fields not entered through CPRS and display them along with the data entered by the clinician.

- **actions that can be taken**

+ Enter ?? for more actions					
DC	Discontinue	ED	Edit	VF	Verify
HD	Hold	RN	(Renew)	AL	Activity Logs
Select Item(s): Next Screen//					

This list contains each field included in the Unit Dose order.



Note: Actions enclosed in parenthesis are not available. Fields that may be edited will be identified by a number displayed to the left of the field name. This number is used when selecting fields to be edited. Fields marked with an “*” next to it’s number will cause this order to be discontinued and a new one created if it is changed.

New Order Entry

For Unit Dose order entry you must respond at the “Select DRUG:” prompt. Once you choose the drug, you can follow the same procedure as Unit Dose order entry, as defined in your user parameters.

- **DRUG**

Pharmacists select Unit Dose medications directly from the DRUG file (#50). The Orderable Item for the selected drug will automatically be added to the order, and all dispense drugs entered for the order must be linked to that Orderable Item. If the Orderable Item is edited, data in the dosage ordered field and the dispense drug field will be deleted. If multiple dispense drugs are needed in an order, they may be entered by selecting the dispense drug field from the edit list before accepting the new order. After each dispense drug is selected, it will be checked against the patient’s current medications for duplicate drug or class orders, and drug-drug/drug-allergy interactions.



Note: For IV order entry, you must bypass the “Select DRUG:” prompt in the *Inpatient Order Entry* option (by pressing the Return key) and then choose the IV type at the “Select IV TYPE:” prompt.

- **DOSAGE ORDERED**

To allow pharmacy greater control over the order display shown for Unit Dose orders on profiles, labels, MARs, etc., the dosage ordered field is no longer required. If **no** DOSAGE ORDERED is defined for an order, the order will be displayed as:

```
DISPENSE DRUG NAME  
Give: UNITS/DOSE MEDICATION ROUTE SCHEDULE
```

If DOSAGE ORDERED **is** defined for the order, it will be displayed as:

```
ORDERABLE ITEM NAME DOSE FORM  
Give: DOSAGE ORDERED MEDICATION ROUTE SCHEDULE
```

Note: If an order contains multiple DISPENSE DRUG, DOSAGE ORDERED will be required, and should contain the total dosage of the medication to be administered.

- **UNITS PER DOSE**

This is the number of units (tablets, capsules, etc.) of the dispense drug selected to be given when the order is administered. If no data is entered, the UNITS PER DOSE is assumed to be 1.

- **MED ROUTE**

This is the route of administration to be used for the order. If a default Medication Route is identified for the selected Orderable Item, it will be used as the default for the order.

- **SCHEDULE TYPE**

This defines the type of schedule to be used when administering the order. If the schedule type entered is one time, the order's start and stop dates must be the same. When a new order is entered or an order entered through CPRS is finished by pharmacy, the default Schedule Type is determined as described below:

If a schedule type is defined for the Orderable Item selected, that schedule type is used for the order.

If no schedule type has been found and if no schedule is defined, schedule type is CONTINUOUS.

If no schedule type has been found and the schedule contains PRN, the schedule type is PRN.

If no schedule type has been found and the schedule entered is found in the ADMINISTRATION SCHEDULE file (#51.1), and a schedule type is defined for it, that schedule type is used for the order.

If no schedule type has been found and the schedule is “NOW”, “STAT”, “ONCE”, or “ONE-TIME” the schedule type is ONCE.

If the schedule type determined above is DAY OF WEEK the schedule type is set to CONTINUOUS.

If no schedule type was determined above, the schedule type is CONTINUOUS

- **SCHEDULE**

This defines the frequency the order is to be administered. Schedules may be selected from the ADMINISTRATION SCHEDULE file (#51.1) or non-standard schedules may be used. A non-standard schedule is one that does not have a consistent interval between administrations. Unit Dose recognizes schedules in the following formats:

QxH - Hourly schedules where x is the number of hours between administrations

QxD - Daily schedules where x is the number of days between administrations

QxM - Monthly schedules where x is the number of months between administrations

If a schedule is defined for the Orderable Item selected when entering a new order, that schedule is displayed as the default for the order.

- **ADMINISTRATION TIMES**

This defines the time(s) of day the order is to be given. If the schedule for the order contains “PRN” any administration times for the order will be ignored. In new order entry the default administration times are determined as described below:

If administration times are defined for the Orderable Item selected, they will be shown as the default for the order.

If administration times are defined in the INPATIENT WARD PARAMETERS file (#59.6) file for the patient’s ward and the order’s schedule, they will be shown as the default for the order.

If administration times are defined for the Schedule, they will be shown as the default for the order.

- **SPECIAL INSTRUCTIONS**

This is any special instructions (using abbreviations whenever possible) needed for this order. This would include the physician’s reason for ordering a PRN. This field utilizes the abbreviations and expansions from the MEDICATION INSTRUCTIONS file (#51).

- **START/DATE TIME**

This is the date and time the order is to begin. This package initially assigns the START DATE/TIME to the closest administration time or next admin. time or NOW depends on the value of the DEFAULT START DATE CALCULATION field (#.05) in the INPATIENT WARD PARAMETERS file (#59.6). START/DATE TIME may not be entered prior to 7 days from the order's LOGIN DATE.

- **STOP/DATE TIME**

This is the date and time the order will automatically expire. This package initially calculates a default stop date, depending on the site parameters.

- **PROVIDER**

This identifies the provider who authorized the order. Only users identified as providers who are authorized to write medication orders may be selected.

- **SELF MED**

Identifies the order as to be given for administration by the patient. This prompt is only shown if the 'SELF MED' IN ORDER ENTRY field (#24) of the INPATIENT WARD PARAMETERS file (#59.6) is set to on.

Other Order Actions - Edit, Hold, Discontinue, Renew

Edit

This allows modification of any field shown on the order view that is preceded by a number in parenthesis (#).

Asterisk: If a field marked with an asterisk is changed, the original order will be discontinued, and a new order containing the edited data will be created. The Stop Date/Time of the original order will be changed to the date/time the new edit order is accepted. The old and new orders are linked and may be viewed using the History Log function. When the screen is refreshed, the field(s) that were changed will now be shown in **blinking reverse video** and "This change will cause a new order to be created" will be displayed in the message window.

*(10) Provider: TEAGUE,LYN			
(11) Special Instructions:			
(12) Dispense Drug	U/D	Inactive Date	

DIGOXIN 0.125MG U/D	1		
Entry By: INPATIENT,NURSE		Entry Date: 02/05/98 11:21	
+ This change will cause a new order to be created.			
ED Edit	AC	ACCEPT	

Orderable Item or Dosage Ordered fields: If these fields are edited, the dispense drug data will not be transferred to the new order. If the Orderable Item is changed, data in the dosage ordered field will not be transferred. New Start Date/Time, Stop Date/Time, Login Date/Time, and Entry Code will be determined for the new order. Changes to other fields (those without the asterisk) will be recorded in the order's activity log.

Renew

Only active orders or those which have been expired less than 24 hours may be renewed. The default Start Date/Time for a renewal order is determined as follows:

Default Start Date Calculation = NOW

The default start date/time for the renewal order will be the order's Login Date/Time.

Default Start Date Calculation = USE NEXT ADMIN TIME

The original order's Start Date/Time, the new order's Login Date/Time, Schedule, and Administration Times are used to find the next date/time the order is to be administered after the new order's Login Date/Time. If the schedule contains "PRN" any administration times for the order are ignored.

Default Start Date Calculation = USE CLOSEST ADMIN TIME

The original order's Start Date/Time, the new order's Login Date/Time, Schedule, and Administration Times are used to find the closest date/time the order is to be administered after the new order's Login Date/Time. If the schedule contains "PRN" any administration times for the order are ignored.

After the new (renewal) order is accepted, the Start Date/Time for the new order becomes the Stop Date/Time for the original (renewed) order. The original order's status is changed to RENEWED. The renewal and renewed orders are linked and may be viewed using the History Log function. Once an order has been renewed it may not be renewed or edited.

Discontinue

When an order is discontinued the order's Stop Date/Time is changed to the date/time the action is taken. Pending and Non-verified orders are deleted when discontinued and will no longer appear on the patient's profile. An entry is placed in the order's Activity Log recording who discontinued the order and when the action was taken.

Hold

Only active orders may be placed on hold. Orders placed on hold will continue to show under the ACTIVE heading on the profiles until it is removed from hold. An entry is placed in the order's Activity Log recording the person who placed/removed the order from hold and when the action was taken.

Activity Log

This submenu allows viewing of a long or short profile, or a History Log of the order. A short activity log only shows actions taken on orders and does not include field changes. If a history log is selected, it will find the first order linked to the order where the history log was invoked from, then shows an order view of each order associated with it in the order which they were created.

Verify

Orders must be verified before they can become active and are included on the pick list, MAR, etc. If *AUTO-VERIFY is enabled for the pharmacist, new orders immediately become active after entry or completion (pending orders entered through CPRS). Orders verified by nursing prior to pharmacist verification are displayed on the profile under the active header marked with an -> next to the order number. When verify is selected, the user must enter any missing data and correct any invalid data before the verification is accepted.

*AUTO-VERIFY is controlled by the ALLOW AUTO-VERIFY FOR USER field (#.09) in the INPATIENT USER PARAMETERS file (#53.45).

Order Sets

An Order Set is a group of any number of pre-written orders. The maximum number of orders is unlimited. Order sets are created and edited using the *Order Set Enter/Edit* option found under the *Supervisor's Menu*.

Order sets are used to expedite order entry for drugs that are dispensed to all patients in certain medical practices or for certain procedures. Order sets are designed to be used when a recognized pattern for the administration of drugs can be identified. For example:

- A pre-operative series of medication administered to all patients undergoing a certain surgical procedure
- A certain series of drugs to be dispensed to all patients prior to undergoing a particular radiographic procedure
- A certain group of medications prescribed by a physician for all patients that is treated for a certain medical ailment or emergency.

Order set entry starts like other types of order entry, described above. At the “Select DRUG:” prompt, you will enter **S.NAME**. The **NAME** represents the name of a predefined order set that was created using the *Order Set Enter/Edit* option found on the *Supervisor's Menu*. The characters **S.** tell the software that this will not be a single new order entry for a single drug but a set of orders for multiple drugs. The **S.** is a required prefix to the name of the order set. If you type the characters **S.?** you will receive a list of the names of the order sets that are currently available. If you type **S.** (and press the spacebar and return) you will re-enter the previous order set.

After the entry of the order set, the software will prompt you for the provider's name. After entry of the provider, the first order of the set will automatically be entered. The options available to you are different depending on the type of order entry process that is enabled—regular, abbreviated, or ward. If regular or abbreviated order entry is enabled, you will be shown, one order at a time, all fields for each order of the order set and then the “ACTION” prompt. You can then choose to take action on the order. Once action is taken or bypassed, the next order of the order set will automatically be entered. After entry of all the orders in the order set, the software will prompt you for more orders for the patient. At this point you proceed exactly as in new order entry, and respond accordingly.

Duplicate Orderable Items

You can use the VA FileMan convention of enclosing the duplicate entry name in double quotes to enter the same Orderable Item more than once, for example to add ACETAMINOPHEN to an order set already containing that drug.

Completing an Order Entered Through CPRS

When a clinician enters or edits an order through CPRS, the order must be finished and verified by a pharmacist. The pharmacist may perform different actions on the order depending on what action was taken by the clinician.

When a Clinician Renews an Entry Through CPRS.

When an order is renewed by a clinician through CPRS, the pharmacist needs to finish and verify this order. The same procedures are followed to finish the renewed order as to finish a new order with the following exceptions:

The PENDING RENEWAL orders may be speed finished. You may enter an **F**, for finish, at the “Select ACTION or ORDERS” prompt and then select the pending renewals to be finished. At this time, prompts are issued for the start date/time and stop date/time. These values are used as the start and stop dates and times for the pending renewals selected. You will also be prompted for the provider comments. All other fields will retain the values from the renewed order.

Discontinue All of a Patient's Orders [PSJU CA]

This option allows a pharmacist or a nurse to discontinue all of a patient's orders. Also, it allows a ward clerk to mark all of a patient's orders for discontinuation. If the ALLOW USER TO D/C ORDERS parameter is turned on to take action on active orders, then the ward clerk will also be able to discontinue orders. This ALLOW USER TO D/C ORDERS parameter is set using the *Inpatient User Parameter's Edit* option under the *PARAMeter's Edit Menu* option, which is under the *Supervisor's Menu*.

The *Discontinue All of a Patient's Orders* option is then used to discontinue the selected orders. Remember that if you discontinue a non-verified order, it is deleted completely from the computer.

Hold All of a Patient's Orders [PSJU HOLD ALL]

This option allows a nurse to place all of a patient's active orders on hold in order to temporarily stop the medication from being dispensed, or take all of the patient's orders off of hold to restart the dispensing of the medication.

The option will take no action on individual orders that it finds already on hold. When this option is used to put all orders on hold, the system will print labels, for each medication order newly put on hold, indicating on the label that the medication is on hold. Also, the profile will notify you that the patient's orders have been placed on hold, and the letter **H** will be placed in the Status/Info column on the profile for each formerly active order.

When the option is used to take all orders off of Hold, the system will reprint labels for the medication orders that were taken off Hold and indicate on the label that medication is off hold. Again, this option will take no action on individual orders that it finds were not on hold. The profile will notify you that the patient's orders have been taken off hold.

Individual orders can be placed on hold or taken off of hold through the *Order Entry* and *Non-Verified/Pending Orders* options.

To take the orders **off of hold**, choose this same option and you will see

```
THIS PATIENT'S ORDERS ARE ON HOLD.  
DO YOU WANT TO TAKE THIS PATIENT'S ORDERS OFF OF HOLD? Yes// <RET>  
(Yes).....DONE!
```


What You Can Edit

EUP Edit Inpatient User Parameters [PSJ UEUP]

This option allows users to edit various Inpatient User parameters. The prompts you will encounter are as follows:

“PRINT PROFILE IN ORDER ENTRY:”

Enter **yes** for the opportunity to print a profile after entering Unit Dose orders for a patient.

“INPATIENT PROFILE ORDER SORT:”

The Inpatient profile will sort orders either by medication or by start date of order. Choose which of these you want to use.

“LABEL PRINTER:”

Enter the device on which you want labels to print.

“USE WARD LABEL SETTINGS:”

Enter **yes** to have any labels created by your actions print on the printer designated for the *ward* instead of the printer designated for the *pharmacy*.

Patient's Default Stop Date [PSJU CPDD]

The default stop date is the date used as a default value for the STOP DATE/TIME of Unit Dose orders during order entry and renewal processes. This value is used only if the corresponding ward parameter is enabled. The order entry and renewal processes will sometimes change this date.

When the SAME STOP DATE ON ALL ORDERS parameter is enabled, the module will assign a default stop date for each patient. This date is initially set when the first order is entered for the patient, and can change when an order for the patient is renewed. This date is shown as the default value for the stop date of each of the orders entered for the patient.

This option allows either the pharmacist or the pharmacy technician to edit a patient's default stop date.



Note: If this parameter is not enabled, you can still edit a patient's default stop date. But unless the parameter is enabled, the default stop date will not be seen or used by the module.

All About MARs

24 24 Hour MAR [PSJU 24 D MAR]

The 24 Hour MAR is a report that can be used to track the administration of a patient's medications over a 24-hour period. The 24 Hour MAR includes:

- Date/time range covered by the MAR
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials.

You can print the MAR by ward group (**G**), by ward (**W**), or by patient (**P**). If you print by patient you will be given the opportunity to select more than one patient. The computer will keep prompting, "Select another PATIENT". If an (^) is entered, you will return to the report menu. When all patients are entered, press return at this prompt.



Note: If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name, or room-bed.

There are six medication choices in V. 5.0. You may select multiple choices of medications to be printed on the 24 Hour MAR. Since the first choice is ALL Medications, you will not be allowed to combine this with any other choices. The default choice is “Non-IV Medications only” if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. You chose to select by Ward Group.
3. You are selecting by patients and patients are from different wards.

The MAR is separated into two sheets. The first sheet is for continuous medications and the second sheet is for one-time and PRN medications. When you run the 24 Hour MAR with orders, both sheets will print for each patient, even though the patient might only have one type of order. You can also print blank MARs and designate which sheets to print. You can print continuous-medication sheets only, PRN sheets only, or both. The blank MARs contain patient demographics, but no order data. Order information can be added manually or with labels.

Each sheet of the 24 Hour MAR consists of three parts:

1. The top part of each sheet contains the patient demographics.
2. The main body of the MAR contains the order information and an area to record the medication administration.
 - a. The order information prints on the left side of the main body, printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should *never* be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.
 - b. The right side of the main body is where the actual administration is to be recorded. It is marked in one hour increments on the 24 Hour MAR to simplify this.
3. The bottom of the form allows space for signatures/titles, initials for injections, allergies, injection sites, omitted doses, reason for omitted doses, and initials for omitted doses.

At the “Enter START DATE/TIME for 24 Hour MAR:” prompt, indicate, in military time, the date, and the time of day the 24 Hour MAR is to start, including leading and trailing zeros. The time that you enter into this field will print on the 24 Hour MAR as the earliest time on the time line. If the time is not entered at this prompt, the time will default to the time specified in the ward parameter, “START TIME OF DAY FOR 24 HOUR MAR:”. If the ward parameter is blank, then the time will default to 0:01 a.m. system time.

Please keep in mind that the MAR is designed to print on stock 8 1/2” by 11” paper at 16 pitch (6 lines per inch). We strongly recommend that this report be queued to print at a later time.

7 7 Day MAR **[PSJU 7D MAR]**

The 7 Day MAR (Medication Administration Record) is a report form that can be used to track the administration of patients' medications.

The 7 Day MAR includes:

- Date/time range covered by the MAR
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials.

You can print the MAR by ward group (**G**), by ward (**W**), or by patient (**P**). If you print by patient you will be given the opportunity to select more than one patient. The computer will keep prompting, "Select another PATIENT". If an (^) is entered, you will return to the report menu. When all patients are entered, press return at this prompt.



Note: If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name, or room-bed.

There are six medication choices in V. 5.0. You may select multiple choices of medications to be printed on the 7 Day MAR. Since the first choice is ALL Medications, you will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. For Ward group.
3. Selected by patients and patients are from different wards.

The 7 Day MAR also allows you to choose whether to print one of the two sheets, continuous-medication or PRN, or to print both.

Each sheet of the MAR consists of three parts:

1. The top part of each sheet contains the patient demographics.
2. The main body of the MAR contains the order information and an area to record the medication administration.
 - a. The order information prints on the left side of the main body, printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should *never* be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.
 - b. The right side of the main body is where the actual administration is to be recorded. On the continuous-medication sheet, the right side will be divided into seven columns, one for each day of the range of the MAR. Asterisks will print at the bottom of the columns corresponding to the days on which the medication is not to be given (e.g., Orders with a schedule of Q3D would only be given every three days, so asterisks would appear on days the medication should not be given).
3. The bottom of the form is designed to duplicate the bottom of the current CMR (VA FORM 10-2970), the back of the current PRN and ONE TIME MED RECORD CMR (VA FORM 10-5568d). The MAR is provided to record other information about the patient and his or her medication(s). It is similar to the bottom of the 24 Hour MAR, but lists more injection sites and does not allow space to list allergies.

For IV orders that have no schedule, ***** will print on the bottom of the column corresponding to the day the order is to expire. On the continuous-medication sheet only, there might be additional information about each order under the column marked notes. On the first line, **SM** will print if the order has been marked as a self med order. The letters **HSM** will print if the order is marked as a hospital supplied self med. On the second line, **WS** will print if the order is found to be a ward stock item and **CS** will print if the item is a Controlled Substance. If the order is printed in more than one block, the RPH and RN initial line will print on the last block.

The answer to the prompt, "Enter START DATE/TIME for 7 Day MAR:" determines the date range covered by the 7 Day MAR. The stop date is automatically calculated. Entry of *time* is not required, but if a time is entered with the date, only those orders that expire after the date and time selected will print. If no time is entered, all orders that expire on or after the date selected will print.

Please keep in mind that the MAR is designed to print on stock 8 1/2" by 11" paper at 16 pitch (6 lines per inch). We strongly recommend that this report be queued to print at a later time.

14 14 Day MAR [PSJU 14 D MAR]

The 14 Day MAR (Medication Administration Record) is a report form that can be used to track the administration of patients' medications.

The 14 Day MAR includes:

- Date/time range covered by the MAR
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials.

You can print the MAR by ward group (**G**), by ward (**W**), or by patient (**P**). If you print by patient you will be given the opportunity to select more than one patient. The computer will keep prompting, "Select another PATIENT". If an (^) is entered, you will return to the report menu. When all patients are entered, press return at this prompt.



Note: If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name, or room-bed.

There are six medication choices in V. 5.0. You may select multiple choices of medications to be printed on the 14 Day MAR. Since the first choice is ALL Medications, you will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. You chose to select by Ward Group.
3. You are selecting by patients and patients are from different wards.

The 14 Day MAR allows you to choose whether to print one of the two sheets, continuous-medication or PRN, or to print both.

Each sheet of the MAR consists of three parts:

1. The top part of each sheet contains the patient demographics.
2. The main body of the MAR contains the order information and an area to record the medication administration.
 - a. The order information prints on the left side of the main body, printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should *never* be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.
 - b. The right side of the main body is where the actual administration is to be recorded. On the continuous-medication sheet, the right side will be divided into 14 columns, one for each day of the range of the MAR. Asterisks will print at the bottom of the columns corresponding to the days on which the medication is not to be given (e.g., Orders with a schedule of Q3D would only be given every three days, so asterisks would appear on two days out of three).
3. The bottom of the MAR is provided to record other information about the patient and his or her medication(s). It is similar to the bottom of the 24-hour MAR, but lists more injection sites.

For IV orders that have no schedule, **** will print on the bottom of the column corresponding to the day the order is to expire. On the continuous-medication sheet only, there might be additional information about each order under the column marked notes. On the first line, **SM** will print if the order has been marked as a self med order. The letters **HSM** will print if the order is marked as a hospital supplied self med. On the second line, **WS** will print if the order is found to be a ward stock item or Controlled Substances, and **NF** will print if the order is found to be a non formulary.

The answer to the prompt, "Enter START DATE/TIME for 14 Day MAR:" determines the date range covered by the 14 Day MAR. The stop date is automatically calculated. Entry of time is *not* required, but if a time is entered with the date, only those orders that expire after the date and time selected will print. If no time is entered, all orders that expire on or after the date selected will print.

Please keep in mind that the MAR is designed to print on stock 8 1/2" by 11" paper at 16 pitch (6 lines per inch). We strongly recommend that this report be queued to print at a later time.

AP1 Action Profile #1

[PSJU AP-1]

The Action Profile #1 is a form that contains all of the active inpatient medication orders for one or more patients. These patients may be selected individually by patient name, by ward, or ward group. If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

There are six medication choices in V. 5.0. You may select multiple choices of medications to be printed on the Action Profile #1. Since the first choice is ALL Medications, you will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. You chose to select by Ward Group.
3. You are selecting by patients and patients are from different wards.

The form is printed so that the attending physician will have a method of periodically reviewing these active medication orders. If you choose to run this option by patient, you are given the opportunity to select as many patients as you desire, but only those that have active orders.

Also on this profile, the physician can renew, discontinue, or take no action regarding the active orders for each patient. A new order will be required for any new medication prescribed or for any changes in the dosage or directions of an existing order. If no action is taken, a new order is not required.

If you choose to enter a start and stop date, only patients with active orders occurring between those dates will print (for the ward or wards chosen). The start and stop dates must be in the future (NOW is acceptable). Time is required only if the current date of TODAY or T is entered.

It is recommended that the action profiles be printed on two-part paper, if possible. Using two-part paper allows a copy to stay on the ward and the other copy to be sent to the pharmacy.



Note: Non-Verified and Verified allergies and adverse reactions are now displayed on the report header.

AP2 Action Profile #2

[PSJU AP-2]

The *Action Profile #2* option is similar to the *Action Profile #1* option (see previous section) with the added feature that you can show orders that will expire only, giving in effect, stop order notices (see Inpatient Stop Order Notices).

You can run the *Action Profile #2* option by patient, ward, or ward group. If you choose to run this option by patient, you are given the opportunity to select as many patients as you desire, but you will not get a report if the patient has no active orders.

If you choose to run the option for a ward or a ward group, you are prompted to choose the ward or ward group for which you want to run the option. You are first asked if you want to sort (print) Action Profiles by team or treating provider. You are then prompted for start and stop dates. Only those patients with at least one active order that has a stop date between the dates chosen will print. If entered, the start and stop dates must be in the future (NOW is acceptable). Time is required only if the current date of TODAY or T is entered. A future date does not require time to be entered.

At the “Print (A)ll active orders, or (E)xpiring orders only? A//” prompt, you can choose to print all active orders for the patient(s) selected, or print only orders that will expire within the date range selected for the patient(s) selected.

It is recommended that the action profiles be printed on two-part paper, if possible. Using two-part paper allows a copy to stay on the ward and the other copy to be sent to the pharmacy.



Note: Non-Verified and Verified allergies and adverse reactions are now displayed on the report header.

Medications Due Worksheet [PSJ MDWS]

This report lists active medications (Unit Dose and IV) that are due within a selected 24 hour period. You will be able to select by ward group, ward, or individual patients. If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the Medications Due Worksheet may be sorted by administration time, patient name, or room-bed. However, if you choose to select by patient, multiple patients can be entered.

For IV orders that have no schedule, the projected administration times will be calculated based on the order's volume, flow rate, and start time. An * will be printed for the admin. times instead of the projected admin. times.

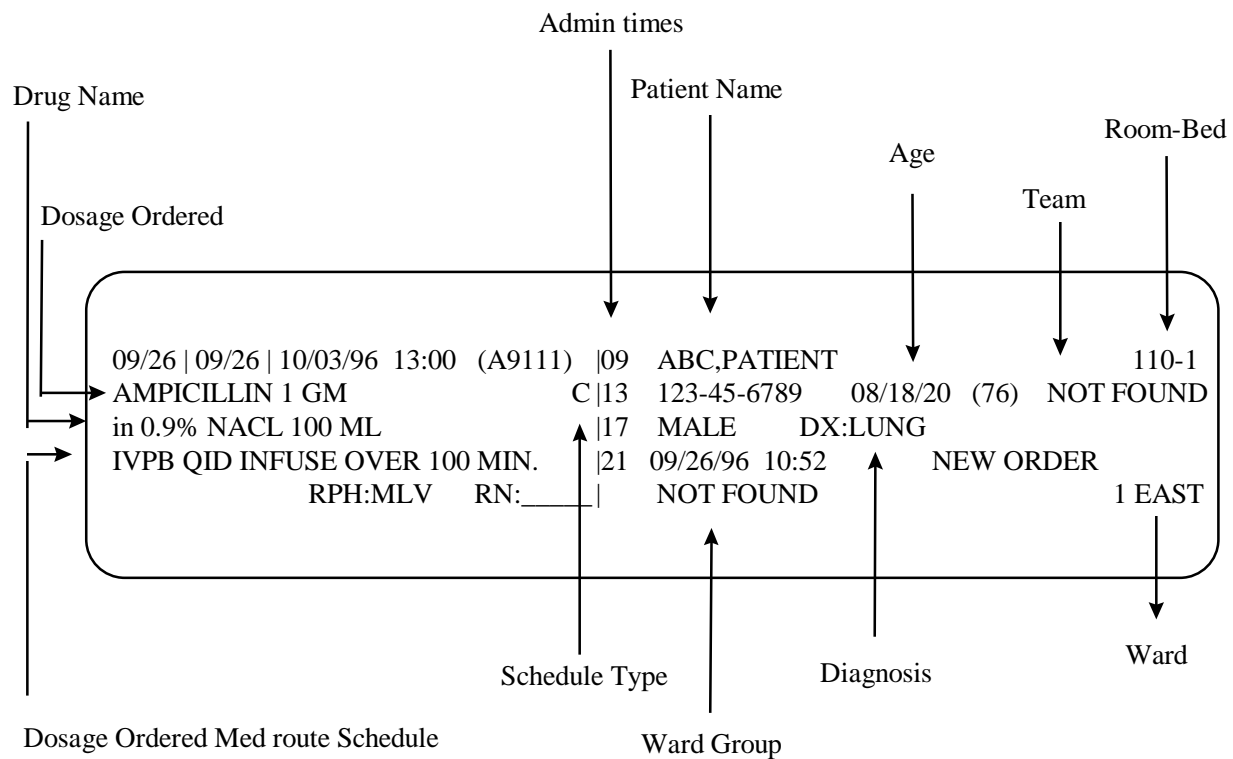
If the "MAR ORDER SELECTION DEFAULT" field for the ward parameter is defined, the default will be displayed at the "Enter medication type(s)" prompt.

The default choice is 2 or Non-IV Medications only if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. You chose to select by Ward Group.
3. You are selecting by patients and patients are from different wards.

The PRN medication orders will be printed if the user enters yes at the "Would you like to include PRN Medications (Y/N)?" prompt. PRN orders will be listed after all continuous and one-time orders are printed.

Following is an example of an IV piggyback order on the Medications Due Worksheet to be administered at 1:00.



Reports, Reports, and More Reports

Authorized Absence/Discharge Summary [PSJU DS]

This report allows you to determine what action to take on a patient's unit dose orders if the patient is discharged from the hospital or will leave the hospital for a designated period of time (authorized absence). The form is printed so that the physician can place the active orders of a patient on hold, take no action on the order, or continue the order upon discharge or absence. If the physician wishes to continue the order upon discharge, then he or she can identify the number of refills, the quantity, and the number of days for the order to remain active. If no action is taken on the order, it will expire or be discontinued.

You can run the authorized absence/discharge summary by patient, ward, or ward group. If you choose to run this option by patient, you are given the opportunity to select as many patients as you desire, but only patients with active orders can be selected.

If you choose to run this option by ward or ward group, you will be prompted for start date and stop date. Entry of these dates is not required, but if a start and stop date are entered, a discharge summary will print only for those patients that have at least one order that will be active between those dates. If you do not enter a start date, all patients with active orders will print (for the ward or ward group chosen). If a clinic visit has been scheduled, the date will print. If more than one has been scheduled, only the first one will print. We recommend that you queue this report to print when user demand for the system is low.

For copayment purposes, information related to the patient's service connection is shown on the first page of the form (for each patient). If the patient is a service-connected less than 50% veteran, the physician is given the opportunity to mark each non-supply item order as either SERVICE CONNECTED (SC) or NON-SERVICE CONNECTED (NSC).



Note: Non-Verified and Verified allergies and adverse reactions are now displayed on the report header.

Reports

**Extra Units Dispensed Report
[PSJU EUDD]**

Allows the user to print a report showing the amounts, date dispensed, and the initials of the person who entered the dispensed drug. This can be printed by patient, ward, or a ward group. If you choose to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

**Inpatient Stop Order Notices
[PSJ EXP]**

The *Inpatient Stop Order Notices* option produces a list of patients' medication orders which are about to expire. Action must be taken (using VA FORM 10-1158) if these medications are to be reordered. This option will list both Unit Dose (UD) orders and IV orders. You may choose to print All, which is the default, or either the UD or IV orders.

If you choose to print by Ward, you may select to sort by Administration teams. ALL teams, which is the default, multiple teams, or one Administration team may be chosen.



Note: The special instructions field now prints on UD orders. Verified allergies and adverse reactions are now displayed on the report header.

**Patient Profile (Extended)
[PSJ EXTP]**

This report allows the viewing of all the orders on file for a patient. You can view all of the orders that have not been purged or enter a date to start searching from.

INquiries Menu

[PSJU INQMGR]

The *INquiries Menu* option allows you to view information concerning standard schedules and drugs. You cannot edit any information in this option, so there is no danger of disrupting the Unit Dose module's operation. The *INquiries Menu* contains the following suboptions:

Dispense Drug Look-Up

[PSJU INQ DRUG]

This option allows you to see what drugs are in the DRUG file (#50), and any Unit Dose information pertaining to them.

Standard Schedules

[PSJU INQ STD SCHD]

It is extremely important for all users to know the method of schedule input. When you enter a standard schedule, the system will echo back the corresponding Administration times.

IPF Inpatient Profile [PSJ PR]

This option allows you to view the Unit Dose (UD) and IV orders of a patient simultaneously. You can conduct the Inpatient Profile search by patient, ward, or ward group. If you select to sort by ward, the administration teams may be specified. The default for the administration team is ALL and multiple teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

When you access this option from the Unit Dose module for the first time within a session, you are first asked to select the IV room in which you wish to enter orders. You are then given the label and report devices defined for the IV room you choose. If no devices have been defined, you will be given the opportunity to edit them. If you exit this option and re-enter within the same session, you are shown your current label and report devices.

In the following description we will talk only about viewing a profile by patient, but ward and ward group are handled similarly.

After you select the patient for whom you need to view a profile, you are asked to choose the length of profile. You can choose to view a long or short profile or, if you decide not to view a profile for the chosen patient, you can select "NO Profile" to return to the "Select another PATIENT" prompt and choose a new name.

Once you choose the length of profile you wish to view, you can print the patient profile (by accepting the default or typing **P** at the "SHOW PROFILE only, EXPANDED VIEWS only, or BOTH? Profile/" prompt), an expanded view of the patient profile (by typing **E**), or both (by typing **B**). The expanded view lists the details of each order for the patient. If you choose to print the expanded view or both the expanded view and the profile, you can also print the activity logs of the orders.

The advantage of this option is that by viewing the combined UD/IV profile of a patient, you can quickly determine if any corrections or modifications need to be made for existing or future orders based on Unit Dose or IV medications already being received by the patient. Sometimes the pharmacist must revise a prospective order for a patient based on the Unit Dose or IV medications already prescribed for the patient.



Note: For IV orders, the short and long activity logs give you the same results. However, for Unit Dose orders, the long activity log shows all activities of an order, while the short activity log excludes the field changes, and shows only the major activities. Verified drug allergies and adverse reactions are now displayed on the profile header.

Misc.

Align Labels (Unit Dose)

[PSJU AL]

Allows the user to align the label stock on a printer so that Unit Dose order information will print within the physical boundaries of the label.

Discontinue All of a Patient's Orders

[PSJU CA]

Allows the nurse to discontinue all of a patient's orders..

Label Print/Reprint

[PSJU LABEL]

Allows the user to print new unprinted labels and/or reprint the latest label for any order containing a label record.

Patient Profile (Unit Dose)

[PSJU PR]

Allows a user to print a profile (list) of a patient's orders for the patient's current or last (if patient has been discharged) admission, to any device. If the user's terminal is selected as the printing device, this option will allow the user to select any of the printed orders to be shown in complete detail, including the activity logs, if any.

The user may print patient profiles for a single patient, for an entire WARD GROUP or an entire WARD.

Misc.

Glossary

Action Prompt

There are two types of “Action” prompts that occur during order entry. One type of requesting action on the order is the standard ListMan action prompt. The choices are listed in the footer of the ListMan screen. The following actions are valid:

PU	Patient Record Updates
DA	Detailed Allergy/ADR List
VP	View Profile
NO	New Orders Entry
IN	Intervention Menu
PI	Patient Information
SO	Select Order
DC	Discontinue
ED	Edit
VF	Verify
HD	Hold
RN	Renew
AL	Activity Logs
OC	On Call
+	Next Screen
-	Previous Screen
UP	Up a Line
DN	Down a Line
>	Shift View to Right
<	Shift View to Left
FS	First screen
LS	Last Screen
GO	Go to Page
RD	Re Display Screen
PS	Print Screen
PL	Print List
SL	Search List
Q	Quit

ADPL	Auto Display (on/off)
MAR	MAR Menu
LBL	Label Patient/Report
OTH	Other Pharmacy Options
JP	Jump to a Patient
CO	Copy

Active Order

Any order which has not expired or been discontinued. Active orders also include any orders that are on hold or on call.

Activity Reason Log

The complete list of all activity related to a patient order. The log contains the action taken, the date of the action, and the user who took the action.

Additive

A drug that is added to an IV solution for the purpose of parenteral administration. An additive can be an electrolyte, a vitamin or other nutrient, or an antibiotic, but only electrolyte - or multivitamin-type additives can be entered as IV fluid additives in CPRS.

Administration Schedule File

File #51.1. This file contains administration schedule names and standard dosage administration times. The name is a common abbreviation for an administration schedule type (e.g., QID, Q4H, PRN). The administration time is entered in military time, with each time separated from the next by a dash, and times listed in ascending order.

Administering Teams

Nursing teams used in the administration of medication to the patients. There can be a number of teams assigned to take care of one ward, with specific rooms and beds assigned to each team.

Admixture

An admixture is composed of any number of additives (including zero) in one solution. It is given at a specified flow rate; when one bottle or bag is empty, another is hung.

Average Unit Drug Cost

The total drug cost divided by the total number of units of measurement.

Chemotherapy

Chemotherapy is the treatment or prevention of cancer with chemical agents. The chemotherapy IV type can be administered as a syringe, admixture, or a piggyback. Once the subtype (syringe, piggyback, etc.) is selected, the order entry follows the same procedure as the type that corresponds to the selected subtype (e.g., piggyback type of chemotherapy follows the same entry procedure as regular piggyback IV).

Chemotherapy “Admixture”

The Chemotherapy “Admixture” IV type follows the same order entry procedure as the regular admixture IV type. This type is used when the level of toxicity of the chemotherapy drug is high and is to be administered continuously over a long period of time (e.g., seven days).

Chemotherapy “Piggyback”

The Chemotherapy “Piggyback” IV type follows the same order entry procedure as the regular piggyback IV type. This type of chemotherapy is used when the chemotherapy drug does not have time constraints on how fast it must be infused into the patient. These types are normally administered over a 30 - 60 minute interval.

Chemotherapy “Syringe”

The Chemotherapy “Syringe” IV type follows the same order entry procedure as the regular syringe IV type. Its administration may be continuous or intermittent. This type is selected by the pharmacist when the level of toxicity of the chemotherapy drug is low and needs to be infused directly into the patient within a short time interval (usually 1-2 minutes).

Continuous Syringe

A syringe type of IV that is administered continuously to the patient, similar to a hyperal IV type. This type of syringe is commonly used on outpatients and administered automatically by an electrical device.

Coverage Times

The start and end of coverage period designates administration times covered by a

manufacturing run. There must be a coverage period for all IV types: admixtures and primaries, piggybacks, hyperals, syringes, and chemotherapy. For one type, admixtures for example, you might define two coverage periods; one from 1200 to 0259 and another from 0300 to 1159 (this would mean that you have two manufacturing times for admixtures).

CPRS

A **VISTA** computer software package called Computerized Patient Record Systems. CPRS is an application in **VISTA** that allows the user to enter all necessary orders for a patient in different packages from a single application. All non-verified orders that appear in the IV module are initially entered through the CPRS package.

Cumulative Doses

The number of IV orders actually administered, which equals the total number of bags dispensed less any recycled, destroyed, or canceled bags.

Default Answer

The most common answer, predefined by the computer to save time and keystrokes for the user. The default answer appears before the two slash marks (//) and can be selected by the user by pressing the Return key.

Dispense Drug

The Dispense Drug name has the strength attached to it (e.g., Acetaminophen 325 mg). The name alone without a strength attached is the Orderable Item name.

Delivery Times

The time(s) when IV orders are delivered to the wards.

Dosage Ordered

After you have selected the drug during order entry, the dosage ordered field is asked next. You should only answer this field if the actual dosage or strength ordered is different from the available drug choices.

Drug Electrolytes File

File #50.4. This file contains the names of anions/cations, and their concentration units.

Electrolyte	An additive that disassociates into ions (charged particles) when placed in solution.
Entry Code	The name of the user who entered the IV order into the computer.
Hospital Supplied Self Med	Self med which is to be supplied by the Medical Center's pharmacy. Hospital supplied self med is only prompted for if the user answers Yes to the SELF MED prompt during order entry.
Hyperalimentation (Hyperal)	Long term feeding of a protein-carbohydrate solution. Electrolytes, fats, trace elements and vitamins can be added. Since this solution generally provides all necessary nutrients, it is commonly referred to as Total Parenteral Nutrition (TPN). A hyperal is composed of many additives in two or more solutions. When the labels print, they show the individual electrolytes in the hyperal order.
Infusion Rate	The designated rate of flow of IV fluids into the patient.
Integrity Checker	The portion of the IV module that validates that the user has answered all necessary fields to complete an order.
Intermittent Syringe	A syringe type of IV that is administered periodically to the patient according to an administration schedule.
Internal Order Number	The number on the top left corner of the label of an IV bag in brackets ([]). This number can be used to speed up the entry of returns and destroyed IV bags.
IV Additives File	File #52.6. This file contains drugs which are used as additives in the IV room. Data entered includes drug generic name, print name, drug information, synonym(s), dispensing units, cost per unit, days for IV order, usual IV schedule, administration times, electrolytes, and quick code information.

IV Category File

File #50.2. This file allows the user to create categories of drugs in order to run “tailor-made” IV cost reports for specific user-defined categories of drugs. The user can group drugs into categories.

IV Solutions File

File #52.7. This file contains drugs which are used as primary solutions in the IV room. The solution must already exist in the DRUG file (#50) to be selected. Data in this file includes: drug generic name, print name, status, drug information, synonym(s), volume, and electrolytes.

Label Device

The device, identified by the user, on which computer-generated labels will be printed.

LVP

Large Volume Parenteral – Admixture. A solution intended for continuous parenteral infusion, administered as a vehicle for additive(s) or for the pharmacological effect of the solution itself. Composed of any number of additives, including zero, in one solution. An LVP runs continuously, with another bag hung when one bottle or bag is empty.

Manufacturing Times

The time(s) that designate(s) the general time when the manufacturing list will be run and IV orders prepared. This field in the *Site Parameters (IV)* option (IV ROOM file, #59.5) is for documentation only and does not affect IV processing.

Medication Administering Team File

The Medication Administering Team file (#57.7) contains wards, the teams used in the administration of medication to that ward, and the rooms/beds assigned to that team.

Medication Instruction File

The Medication Instruction File (#51.2) is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.

Medication Routes File

File #51.2. contains medication route names. You can enter an abbreviation for each route to be used at your site. The abbreviation will most likely be the Latin abbreviation for the term.

Medication Routes/Abbreviations

Route by which medication is administered (e.g., oral). The MEDICATION ROUTES file (#51.2) contains 51 pre-supplied routes. Abbreviations are selected by each VAMC. The abbreviation cannot be longer than five characters to fit on labels and the MAR. You can add new routes and abbreviations as appropriate.

Non-Formulary Drugs

Drugs that are not available for the use of all physicians.

Non-Verified Orders

Any order that has been entered in the Unit Dose module that has not been verified (made active) by a nurse and/or pharmacist. Ward staff may not verify a non-verified order.

Orderable Item

An Orderable Item name has no strength attached to it (e.g., Acetaminophen). The name with a strength attached to it is the Dispense drug name (e.g., Acetaminophen 325mg).

Order Sets

An Order Set is a set of N pre-written orders. N orders indicate that the number of orders in an Order Set is variable. Order Sets are used to expedite order entry for drugs that are dispensed to all patients in certain medical practices and procedures.

Order View

Computer option that allows the user to view detailed information related to one specific IV order of a patient. The order view provides basic patient information and identification of the order variables such as the additives, solutions, strength, bottles, start/stop dates, provider, IV type and room, entry code, last fill, schedule, administration times, infusion rate, other information and remarks, and number of cumulative doses.

Parenteral

Introduced by means other than by way of the digestive track.

Patient Profile

A listing of a patient's active and non-active IV orders. The patient profile also includes basic patient information, including the patient's name, social security number, date of birth, diagnosis, ward location, date of admission, reactions, and any pertinent remarks.

Pending Order

A pending order is one that has been entered by a clinician through CPRS without Pharmacy completing the order. Once Pharmacy has completed the order, it will become active.

Piggyback

Small volume parenteral solution for intermittent infusion. A piggyback is composed

of any number of additives, including zero, and one solution; the mixture is made in a small bag. The piggyback is given on a schedule (e.g., Q6H). Once the medication flows in, the piggyback is removed; another is not hung until the administration schedule calls for it.

Primary Solution

A solution, usually an LVP, administered as a vehicle for additive(s) or for the pharmacological effect of the solution itself. Infusion is generally continuous. An LVP or piggyback has only one solution (primary solution). A hyperal can have one or more solutions.

Print Name

Drug generic name as it is to appear on pertinent IV output, such as labels and reports. Volume is not part of the print name.

Print Name{2}

Field used to record the additives contained in a commercially purchased premixed solution.

Profile

The patient profile shows a patient's orders. The Long profile includes all of a patient's order, sorted by status: active, non-verified, pending, and non-active. The Short profile will exclude the patient's canceled and expired orders.

Prompt

A point at which the computer questions the user and waits for a response.

Provider

Another term for the physician involved in the prescription of an IV or Unit Dose order for a patient.

Quick Code

An abbreviated form of the drug generic name (from one to ten characters). One of the three drug fields on which lookup is done to locate a drug. Print name and synonym are the other two. Use of quick codes will speed up order entry, etc.

Report Device

The device, identified by the user, on which computer-generated reports selected by the user will be printed.

Schedule (SCH)	The frequency of administration of a medication (e.g., QID, QD, QAM, STAT, Q4H).
Schedule Type (ST)	Codes include: O - one time (i.e., STAT - only once), P - PRN (as needed; no set administration times). C - continuous (given continuously for the life of the order; usually with set administration times). R - fill on request (used for items that are not automatically put in the cart - but are filled on the nurse's request. These can be multidose items (e.g., eye wash, kept for use by one patient and is filled on request when the supply is exhausted). And OC - on call (one time with no specific time to be given, i.e., 1/2 hour before surgery).
Self Med	Medication which is to be administered by the patient to himself.
Standard Schedule	Standard medication administration schedules stored in the ADMINISTRATION SCHEDULE file (#51.1).
Status (STAT)	A - active, E - expired, R - renewed (or reinstated), D - discontinued, H - on hold, I - incomplete, or N - non-verified.
Stop Date/Time	The date and time that orders stop.
Stop Order Notices	A list of patient medications which are about to expire and may require action.
Syringe	Type of IV that uses a syringe rather than a bottle or bag. The method of infusion for a syringe-type IV may be continuous or intermittent.
Syringe Size	The syringe size is the capacity or volume of a particular syringe. The size of a syringe is usually measured in number of cubic centimeters (ccs).
TPN	Total Parenteral Nutrition. The intravenous administration of the total nutrient requirements of the patient. The term TPN is

also used to mean the solution compounded to provide those requirements.

Units per Dose

The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted.

VA Drug Class Code

A drug classification system used by VA that separates drugs into different categories based upon their characteristics. IV cost reports can be run for VA Drug Class Codes.

Ward Group File

The WARD GROUP file (#57.7) contains the name of the ward group, and the wards included in that group. The grouping is necessary for the pick list to be run for specific carts and ward groups.

Ward Group Name

An arbitrarily chosen name used to group wards for the pick list and medication cart.

Index

1

14 Day MAR, 34
14 Day MAR [14], 6

2

24 Hour MAR, 29
24 Hour MAR [24], 6

7

7 Day MAR, 31
7 Day MAR [7], 6

A

Action Area, 4
Action Profile #1, 37
Action Profile #1 [AP1], 7
Action Profile #2, 38
Action Profile #2 [AP2], 7
Activity Log, 21
ADMINISTRATION TIMES, 18
Align Labels (IV) [ALIV], 6
Align Labels (Unit Dose), 47
Align Labels (Unit Dose) [ALUD], 6
All About MARs, 29
Allergy Indicator, 4
Allergy/ADR Information, 10
Asterisk, 20
Authorized Absence/Discharge Summary, 41
Auto Display (On/Off) [ADPL], 5

C

Completing an Order entered through CPRS, 24

D

DA Detailed Allergy Display, 11
Default Start Date Calculation = NOW, 20

Default Start Date Calculation = USE CLOSEST ADMIN TIME, 21
Default Start Date Calculation = USE NEXT ADMIN TIME, 21
Discontinue, 21
Discontinue All of a Patient's Orders, 24, 47
Dispense Drug Look-Up, 43
Dosage Ordered, 20
DOSAGE ORDERED, 17
Down a line [DN], 5
DRUG, 16
Duplicate Orderable Items, 24

E

EA Edit Allergy/ADR Data, 11
Edit, 20
Enter Units Dispensed [EN], 6
Extra Units Dispensed [EX], 6
Extra Units Dispensed Report, 42

F

First Screen [FS], 5

G

Glossary, 49
Go to Page [GO], 5

H

Header Area, 4
Hidden Actions, 5
Hold, 21

I

IN Intervention Menu, 12, 14
Individual Labels (IV) [ILIV], 6
Inpatient Medications Profile, 7
Inpatient Order Entry/Order Entry (UD), 10
Inpatient Profile, 45
Inpatient Stop Order Notices, 42
Inquiries Menu, 43
IV Medications Profile [IV], 7

J

Jump to a Patient [JP], 7

L

Label Print/Reprint, 47
Label Print/Reprint [LBL], 6
Label Print/Reprint [LPUD], 6
Large Volume Parenteral (LVP), 55
Last Screen [LS], 5
List Area:, 4
List Manager, 3

M

MAR Menu [MAR], 6
MED ROUTE, 17
Medications Due, 6
Medications Due Worksheet, 39
Message Window, 4

N

New Order Entry, 16
Next Screen [+], 5
NO New Order Entry, 11
Non-Verified/Pending Orders, 9

O

Order Entry, 9
Order Sets, 23
Order View, 15
Orderable Item, 20
Outpatient Prescriptions [OP], 7

P

Patient Demographics, 10, 13
Patient Demographics/Allergy/ADR Data, 15
Patient Profile (Extended), 42
Patient Profile (Extended) [EX], 7
Patient Profile (Unit Dose), 47
Patient Profiles [PRO], 7
Pharmacy Narratives, 11
Pick List [PL], 6
Pick List Menu [PIC], 6
Previous Screen [-], 5
Print List [PL], 5
Print Screen [PS], 5
PROVIDER, 19

PU Patient Record Update, 11
Putting All of a Patient's Orders on Hold, 25

Q

Quit [Q], 5

R

Re Display Screen [RD], 5
Renew, 20
Report Returns (UD) [RR], 6
Report Returns [RRS], 6
Reports, Reports, and More Reports, 41
Reprint Pick List [RPL], 6
Reprint Scheduled Labels (IV), 6
Returns/Destroyed Entry (IV), 7
Returns/Destroyed Menu [RET], 6

S

SCHEDULE, 18
SCHEDULE TYPE, 17
Scheduled Labels (IV) [SLIV], 6
Screen Title, 4
Search List [SL], 5
SELF MED, 19
Send Pick list to ATC [SND], 6
SPECIAL INSTRUCTIONS, 18
Speed Discontinue [DC], 7
Speed Finish [SF], 7
Speed Renew [RN], 7
Speed Verify [SV], 7
Standard Schedules, 43
START/DATE TIME, 19
STOP/DATE TIME, 19

U

Unit Dose Medications Profiles, 7
Unit Dose Order View List, 15
UNITS PER DOSE, 17
Up a Line [UP], 5
Update Pick List [UP], 6
Using List Manager, 4

V

Verify, 22
VP View Profile, 12

W

What you can Edit, 27
When a Clinician renews an entry through CPRS., 24